

Declaration of Interest

ELECTRONIC DETERMINATION	Papers circulated electronically on 5 July 2022.
Panel reference	PPSSTH-153 – Shoalhaven – RA22/1022 44-52 Coomea St Bomaderry
Acting Chair	Chris Wilson

In relati	on to this matter, I declare	e that I have:			
n	no known conflict of interest ⊠ OR				
a 	an $\operatorname{actual^1}\Box$, $\operatorname{potential^2}\Box$ or reasonably $\operatorname{perceived^3}\Box$ conflict of interest, as detailed below:				
_					
_					
<u> </u>					
RB	_0	Renata Brooks	5/7/22		
Signatu	re	Name	Date		
	·	panel chair is to ensure appropriate ntersign this form, noting any addition	management measures are in place, as onal measures.		
Chair Si	gnature	Name	Date		

Please return this form to the Planning Panels Secretariat at $\underline{enquiry@planningpanels.nsw.gov.au}$

 $^{^{1}}$ An 'actual' conflict of interests is where there is a direct conflict between a member's duties and responsibilities and their private interests or other duties.

² A 'potential' conflict of interests is where a panel member has a private interest or other duty that could conflict with their duties as a panel member in the future.

³ A 'reasonably perceived' conflict of interests is where a person could reasonably perceive that a panel member's private interests or other duties are likely to improperly influence the performance of their duties as a panel member, whether or not this is in fact the case.



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an $\operatorname{actual^1} \square$, potential ² \square or reasonably perceived ³ \square conflict of interest, as detailed below:				
	Chris Wilson	5/7/22		
Signature	Name	Date		
Should a conflict be declared the panel chair is to ensure appropriate management measures are in place, as determined by the chair, and countersign this form, noting any additional measures.				
Chair Signature	Name	Date		

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an actual $^1\square$, potentia					
B-KL	Brian Kirk	5/7/22			
Signature	Name	Date			
	d the panel chair is to ensure a d countersign this form, notin	appropriate management measures are in place g any additional measures.	e, as		
Chair Signature	Name	Date			

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